## FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

/ ]	OWB APPROVAL										
	OMB Number: 3235 0076 Expires: May 31, 2001 Estimated average burden hours per form 1										
	SEC USE ONLY										
		Prefix		Serial							

DATE RECIEVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.) Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 X Rule 506 ☐ Section 4(6) ☐ ULOE Type of Filing: X New Filing □Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (□ check if this is an amendment and name has changed, and indicate change.) The Learning Experience at Fairfield, LLC Telephone Number (Including Area Code) Address of Executive Offices (Number and Street, City, State, Zip Code) 973-539-5392 2740 Route 10, West Morris Plains, NJ 07950 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business Childcare center Type of Business Organization ☐ corporation ☐ limited partnership already formed X other (please specify): Limited Liability Company APR 0 3 2002 ☐ business trust □ limited partnership, to be formed THO: MSON Month Year FINANCIAL Actual or Estimated Date of Incorporation or Organization: X Actual □ Estimated 0 3 0 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: DE CN for Canada; FN for other foreign jurisdiction)

#### GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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## A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:
☐ Each promoter of the issuer, if the issuer has been organized within the past five years;
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>
☐ Each general and managing partner of partnership issuers.
Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Executive Officer □Director XGeneral and/or Managing Partner
Full Name (Last name first, if individual) Michael H. Weissman
Business or Residence Address (Number and Street, City, State, Zip Code) c/o GroupW Holdings, LLC, 2740 Rt. 10, West Morris Plains, NJ 07950
Check Box(es) that Apply: 🛘 Promoter 🖟 Beneficial Owner 🖰 Executive Officer 🗘 Director XGeneral and/or Managing Partner
Full Name (Last name first, if individual) Richard S. Weissman
Business or Residence Address (Number and Street, City, State, Zip Code) c/o GroupW Holdings, LLC, 2740 Rt. 10, West Morris Plains, NJ 07950
Check Box(es) that Apply: □Promoter □Beneficial Owner X Executive Officer □Director □General and/or Managing Partner
Full Name (Last name first, if individual) Stephen N. Cella
Business or Residence Address (Number and Street, City, State, Zip Code) c/o GroupW Holdings, LLC, 2740 Rt. 10, West Morris Plains, NJ 07950
Check Box(es) that Apply: 🗆 Promoter 🖾 Beneficial Owner 💢 Executive Officer 🗀 Director XGeneral and/or Managing Partner
Full Name (Last name first, if individual) Linda Weissman
Business or Residence Address (Number and Street, City, State, Zip Code) c/o GroupW Holdings, LLC, 2740 Rt. 10, West Morris Plains, NJ 07950
Check Box(es) that Apply:     Promoter   Beneficial Owner   Executive Officer   Director   General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: □Promoter. □Beneficial Owner. □Executive Officer □Director □General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Executive Officer □ Director □ General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet or convenduse additional copies of this sheet as necessary)

richangia Timborananan ila	ing this con-			B. IN	IFORMA	tion ab	OUT OF	FERING	100 may 173		
I. Has the issuer solo	l, or does the	issuer inte	nd to sell, t	o non-accr	edited inve		offering?	2			Yes <u>X</u> No
2. What is the minir	num investm	ent that wil	I be accepte	ed from any	y individua	l?			··············		\$375,000
3. Does the offering	permit joint	ownership	of a single t	ınit?							X Yes No
4. Enter the informa associated persons											
Full Name (Last nam None	e first, if indi	vidual)						1			
Business or Residence	Address (N	umber and	Street, City	, State, Zip	Code)						
Name of Associated I	broker or Dea	aler:							······································		
States in Which Person (Check "All States" of [AL][AK] [AZ] [IL] [IN] [MT] [NE] [RI] [SC]					urchasers [DE] [ME] [NY]	[DC] [MD] [NC] [VA]	[ FL] [MA] [ND] [WA]	[GA] X [MI] [OH] [WV]	[ HI] [MN] [OK] [WI]	[ ID ] [MS] [OR] [WY]	
Full Name (Last nam								<u> </u>			
Business or Residence	Address (N	umber and	Street, City	, State, Zip	Code)					4	
Name of Associated I	Broker or De	aler				<u> </u>		<u></u>			
States in Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit P	urchasers						
(Check "All States" o		idual State.	·								🗆 All States
[AL](AK) [AZ] [IL] [IN] [MT] [NE] [RI] [SC]	[AR] [IA] [NV] [SD]	[CA] [KS] [NH] [TN]	[CO] [KY] [NJ] [TX]	[CT] [LA] [NM] [UT]	[DE] [ME] [NY] [VT]	[DC] [MD] [NC] [VA]	[ FL] [MA] [ND] [WA]	[GA] [MI] [OH] [WV]	[ HI] [MN] [OK] [WI]	[ ID ] [MS] [OR] [WY]	[MO] [PA] [PR]
Full Name (Last nam	e first, if ind	ividual)				_					
Business or Residence	Address (N	umber and	Street, City	, State, Zip	Code)						
Name of Associated I	Broker or De	aler	· · · · · · · · · · · · · · · · · · ·								
States in Which Perso	on Listed Ha	s Solicited	or Intends (	o Solicit P	urchasers						
(Check "All States" of [AL] [AK] [IL] [IN] [MT] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[ FL] [MI] [OH]	[GA] [MN] [OK]	[ HI] [MS] [OR]	[ID] [MO] [PA]
[RI] [SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\Box$ and indicate in the columns below the amounts of the securities offered for exchange and already exchange.		
	Type of Securities	Aggregate Offering Price	Amount Alread Sold
	Debt		
	Equity		
	□Common □Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests		
	Other (Specify) Limited Membership Unit	\$375,000	
			<del></del>
	Answer also in Appendix, Column 3, if filing under ULOE.	\$375,000	
2.		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	0	
	/cerearies investors		
	Non-accredited Investors	0	
	Total (for filings under Rule 504 only		
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question I.	Type of Security	Dollar Amount Sold
	Type of offering		
	Rule 505		
	Regulation A		
	Rule 504		
	Total		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of he issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the left of the estimate.		
	Transfer Agent's Fees		
	Printing and Engraving Costs		
	Legal Fees	X	\$5,000
	Accounting Fees		
	Engineering Fees	_	
	Sales Commissions (specify finders' fees separately)		
	Other Expenses (identify):		
	Total	X	\$5,000

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	enses furnished in response to Part C - Questi to the issuer."					\$370,000		
5.	Indicate below the amount of the adjusted g for each the purposes shown. If the amount check the box to the left of the estimate. T	t for any purpose the total of the p	e is not known, furn payments listed mus	ish an estimate	e and			
	gross proceeds to the issuer set forth in response	onse to Part C - Q	Question 4.b above.			Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees				Γ		Γ	
	Purchase of real estate Assignment	of Lease			K	30,000	Γ	
	Purchase, rental or leasing and installation of	of machinery and	equipment		$\overline{\mathbb{X}}$		ХТX	65,000
	Construction or leasing of plant buildings as	nd facilities			Γ		χΓ	135,000
	Acquisition of other businesses (including t may be used in exchange for the assets or se			=	Γ		Γ	
	Repayment of indebtednessSiteDeve	lopment an	nd Coordinati	on	区	75,000	Γ	
	Working capital				Γ		ХX	_50,000
	Other (specify):Corporation_Exp	enses			Γ		Γ	15,000
	Column Totals				Ŋ.	105,000	ΆΓ	265,000
	Total Payments Listed (column totals	added)				Ř <u>37</u>	0,000	)
		D FFD	ERAL SIGNATURE					of a confusion of the c
nstitut	er has duly caused this notice to be signed by es an undertaking by the issuer to furnish to by the issuer to any non-accredited investor	the undersigned of the U.S. Securi	duly authorized pers ities and Exchange	on. If this notic				
uer (P	rint or Type):	Signature			Date	11		
e Lear	ning Experience at Fairfield, LLC					3/8/02		
me of	Signer (Print or Type):	Title of Signer	r (Print or Type):					
Ric	nard Weissman	Manag	ing Member					

## ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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I.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions	Yes	No
	of such rule?	Γ	$\sqrt{k}$

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerers.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this ....... exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the Undersigned duly authorized person.

Issuer (Print or Type):  The Learning Experience at Fairfield, LLC	Signature Date 3/8/02
Name of Signer (Print or Type):	Fille of Signer (Print or Type):  Managing Member

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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	Intend t	o sell to redited s in State	Type of security and aggregate offering price offered in State (Part C - Item I)			urchased in State (Part C-		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL		Х								
AK		X								
ΑZ		Х	:							
AR		Х								
CA		Х								
со		Х							-	
СТ		Х							t	
DE		X								
DC		X								
FL		Х								
GA		Х								
НІ		Х								
ID		Х								
IL		Х								
IN		Х								
IA.		Х								
KS		Х								
KY		X								
LA		Х								
ME		Х								
MD		Х								
МА		Х					1			
MI		Х								
MN		X								
MS		X								
МО		Х								

1					APPENDIX			energy of the second	
	Intend (	to sell to	Type of security and aggregate offering price offered in State (Part C - Item I)	Type of investo		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes -	No
MT		Х							
NE		Х							
NV		X							
NH		X							
NJ		X				,			
NM		X							
NY		X							
NC		X							
ND		Х							
ОН		Х							
OK		X							
OR		Х							
PA		Х							
RI		Х							
SC		Х							
SD		Х							
TN		Х							
TX		Х							
UT	ļ	X							
VT		X			<u> </u>				
VA		X							
WA		X							
WV		Х							
WI		Х							
WY		X							
PR		х							